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NINTH ANNUAL REPORT

OF

THE TRUSTEES

OF THE

Temporary Asylum for the Chronic Insane

AT

WORCESTER,

FOR THE YEAR ENDING SEPTEMBER 30, 1886.

BOSTON:
WRIGHT & POTTER PRINTING CO., STATE PRINTERS,
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1887.

OFFICERS OF THE ASYLUM.

TRUSTEES.

JOHN F. MOORS,	GREENFIELD.
ROCKWOOD HOAR,	WORCESTER.
FRANCIS C. LOWELL,	BOSTON.
ANNA S. FOLSOM,	BOSTON.
FRANCES M. LINCOLN,	WORCESTER.
A. GEORGE BULLOCK,	WORCESTER.
THOMAS H. GAGE,	WORCESTER.

RESIDENT OFFICERS.

HOSEA M. QUINBY, M.D.,	SUPERINTENDENT.
ERNEST V. SCRIBNER, M.D.,	ASSISTANT PHYSICIAN.
CLARENCE R. MACOMBER,	CLERK AND STEWARD.
SOPHIA N. GRAVES,	MATRON.

WILLIAM SHERMAN,	ENGINEER.
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TREASURER.

ALBERT WOOD,	WORCESTER.
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Commonwealth of Massachusetts.

TRUSTEES' REPORT.

To His Excellency the Governor and the Honorable Council.

The Trustees of the Worcester Lunatic Hospital, in their capacity as Trustees of the Temporary Asylum for the Chronic Insane, present this their Ninth Annual Report.

Dr. H. M. Quinby, the superintendent, has given us the main facts with regard to the institution under his charge in his report to us which accompanies this, and to which we call your attention.

It appears from his report that there are at present in the asylum 398 patients.

There have been under treatment during the year 476. There have been discharged 40, while 38 have died. The whole number received has been 71.

We call your attention to what Dr. Quinby says as to the name by which this institution is legally known,—“The Temporary Asylum for the Chronic Insane,”—a name which expressed the purpose and intent of those who established it nine years ago.

It was then expected that the demand for such an institution would be fully met by the new Lunatic Hospital, and that this old one, the oldest in the State, would soon be given up. Experience has not justified this expectation. There is found an imperative necessity for an institution of this sort, and there is no probability that it will be given up.

The designation "Temporary" may as well be dropped from the official designation, as it is from common use, and we feel that there is great force in what Dr. Quinby says of the term "Chronic." It does convey the idea to friends of patients, and to those outside, that this institution has become the receptacle of those for whom there is no hope, and for whom little can or need be done. The statement in his report of one case which seemed hopeless and where recovery has come after many years, assures us that *chronic* cases are not necessarily hopeless. We would endorse his hope that the Legislature will change the name of this institution to that of "Asylum in Worcester."

We also call your attention to what the Superintendent has to say with regard to the improved condition of the patients under his charge, and especially with regard to the more open and free use of the grounds, and the exercise in the open air, and the more unrestrained condition within the house. The nature of the diseases under which these patients are suffering obviously allows the exercise of more freedom on their part than could be permitted to more violent classes. The change in this respect marks a great advance over the old methods of treatment of this class of patients.

It will be borne in mind that the buildings which this institution occupies were erected more than fifty years ago, and when it came to be seen that a new building must soon take its place, repairs ceased to be made, and the buildings were left largely to natural decay.

They are so soon to be given up, it was said, it is not well to do much in the way of repairs. But when it was determined to use them temporarily after the new buildings were erected, Dr. Park, who was then at the head, began at once to make some needed repairs, and this work has gone on steadily ever since for nine years, for the last seven under the supervision of Dr. Quinby. A little has been done each year, and as a result the whole range of buildings has been gone over, modernized and fitted for such use as our age requires in such a structure. For its convenience of arrangement and its adaptability to the purpose for which it was designed it compares quite favorably with newer and

more costly structures. In its original plan it anticipated most of the advantages which experience has confirmed.

The sanitary condition of this asylum is especially to be commended, and to this, to a large degree, is to be attributed the remarkable exemption from sickness of which the superintendent speaks. If it is the *old* hospital in name it deserves to be ranked with new ones in all that constitutes it a fit habitation for the unfortunate class who find a home under its roof.

The renovation of this old building and its adaptation to modern requirements are largely due to the genius for such work which Dr. Quinby has shown, and to the industry and enthusiasm with which he has put his plans into execution. We are glad to have those who knew the institution in its earlier days come and visit it now, and see to what an extent it has kept abreast with the times. The changes and improvements made the past year are briefly indicated in the accompanying report.

It need hardly be said our confidence in Dr. Quinby, as superintendent, is unabated. We believe that all the affairs of this institution are carefully, prudently and tenderly managed.

We are glad to report that no changes have occurred among those who directly administer the affairs of the asylum and but few in the corps of attendants.

J. F. MOORS.
ROCKWOOD HOAR.
FRANCIS C. LOWELL.
ANNA S. FOLSOM.
FRANCES M. LINCOLN.
A. G. BULLOCK.
THOMAS H. GAGE.

OFFICERS AND THEIR SALARIES.

Hosea M. Quinby, M.D., Superintendent,	\$2,000 00
Ernest V. Scribner, M.D., Assistant Physician,	1,000 00
Clarence R. Macomber, Clerk and Steward,	1,000 00
Sophia N. Graves, Matron,	325 00
Wm. Sherman, Engineer,	1,000 00
Albert Wood, Treasurer,	400 00

VALUE OF STOCK AND SUPPLIES,

OCTOBER 1, 1886.

Live stock,	\$200 00
Carriages and agricultural implements,	650 00
Machinery and mechanical fixtures,	9,000 00
Beds and bedding in inmates' department,	8,964 35
Other furniture in inmates' department,	3,000 00
Personal property of State in superintendent's department,	9,500 00
Ready-made clothing,	898 88
Dry goods,	1,084 61
Provisions and groceries,	3,792 81
Drugs and medicines,	300 00
Fuel,	930 00
Library,	325 00
Other supplies,	1,798 90
	\$40,444 55

TREASURER'S REPORT.

To the Trustees of the Asylum for the Chronic Insane.

LADIES AND GENTLEMEN:—I herewith submit my Ninth Annual Report on the finances of the Asylum for the Chronic Insane, for the year ending Sept. 30, 1886:—

RECEIPTS.

Cash on hand, Sept. 30, 1885:—

Cash belonging to asylum,	\$9,346 70	
Deposits of inmates,	767 26	
	<hr/>	\$10,113 96

Amounts received:—

From the Commonwealth for support of patients, \$18,384 87		
cities and towns for support of patients, 53,643 13		
other sources,	614 95	
patients (on deposit),	60 24	
	<hr/>	72,703 19
		<hr/>
		\$32,817 15

The expenditures for the year have been as follows:—

Salaries and wages,	\$20,614 18	
Extra labor (ordinary),	24 00	
	<hr/>	\$20,638 18

Provisions and supplies, viz.:—

Meats of all kinds,	\$3,874 04	
Fish of all kinds,	693 73	
Fruit and vegetables,	1,586 38	
Flour,	4,514 95	
Meal for table,	78 55	
Grain and hay,	244 92	
Tea and coffee,	446 60	
Sugar and molasses,	1,247 77	
Milk, butter and cheese,	7,693 05	
Salt and other groceries,	926 65	
All other provisions,	1,376 06	
	<hr/>	\$22,682 70
		<hr/>

Amount carried forward, \$43,320 88

<i>Amount brought forward,</i>		\$43,320 88
Clothing and other material,	\$4,362 26	
Fuel,	3,637 63	
Light,	1,545 44	
Medicine and medical supplies,	392 92	
Furniture and furnishings,	1,730 24	
Crockery,	344 63	
Beds and bedding,	1,050 88	
Transportation,	189 09	
Travelling,	169 14	
Trustees' expenses,	41 62	
Soap and water,	1,193 64	
Stationery,	98 27	
Undertaking,	285 50	
Repairs (ordinary),	3,000 00	
All other current expenses,	1,476 47	
		<hr/> 19,517 73
Total current expenses,		\$62,838 61
Repairs and improvements (extraordinary),	\$9,678 49	
Refunded inmates from deposits,	33 00	
		<hr/> 9,711 49
Total amount expended,		\$72,550 10
Cash on hand, Sept. 30, 1886,		10,267 05
		<hr/> \$82,817 15

RESOURCES.

Cash on hand,	\$10,267 05	
Due from the Commonwealth,	4,591 49	
cities and towns,	14,368 05	
other sources,	211 32	
		<hr/> \$29,437 91

LIABILITIES.

Due for supplies and expenses,	\$4,231 13	
salaries and wages,	1,744 75	
Due inmates (cash on deposit),	794 50	
		<hr/> 6,770 38
Total surplus,		\$22,667 53

Respectfully submitted,

ALBERT WOOD,

Treasurer.

WORCESTER, MASS., Oct. 1, 1886.

WORCESTER, MASS., Oct. 16, 1886.

The undersigned has this day carefully compared the Treasurer's statement of expenditures for the year ending Sept. 30, 1886, with the vouchers which are on file at the Asylum, and found it to be correct.

THOMAS H. GAGE,

Auditor of Accounts.

SUPERINTENDENT'S REPORT.

To the Trustees of the Asylum for the Chronic Insane.

LADIES AND GENTLEMEN : — I herewith submit for your consideration the Ninth Annual Report of the Superintendent of the Asylum for the Chronic Insane.

Oct. 1, 1885, there remained at the asylum 405 patients, of whom 207 were males and 198 females. Forty-one males and 30 females were admitted, 33 males and 7 females were discharged and 23 males and 15 females died, leaving at the close of the official year 398 patients, — 192 males and 206 females.

The total number of patients under treatment during the year has been 476, — 248 males and 228 females, with a daily average of 400.28.

Of the 71 persons admitted, 40 males and 26 females were transferred from the Danvers Lunatic Hospital, 4 females from the almshouse at Tewksbury, and 1 male from the Northampton Lunatic Hospital.

Of the persons discharged, 24 were transferred to the State Almshouse at Tewksbury, 5 to Bridgewater Almshouse, 1 to the Danvers Lunatic Hospital, 3 were removed from the State by the Board of Health, Lunacy and Charity, 4 were taken home by friends, 1 was removed by Overseers of the Poor to their almshouse, and 1 escaped. Of the above number, 35 were reported not improved at the time of their discharge, 4 were reported improved, and 1 recovered.

The patient discharged recovered was a female, first committed to Taunton in May, 1872, at the age of 44 years, and transferred to the asylum in October, 1877, suffering from

chronic dementia with delusions. She was vain, silly, garrulous, and at times irritable, and continued so for five years, when the active manifestations of her disease ceased, and for the next two years she led the life of a quiet dement. From this time on she began to show signs of interest in her surroundings, and in the summer of '85 was sent on a visit to her friends in New Hampshire. After staying there some three or four months she returned to the asylum vastly improved in bodily health and with little or no remaining evidence of former mental disturbance. As her friends were not able to care for her, she remained at the asylum through the winter, but was finally discharged in April of the present year, after a continuous hospital residence of 13 years and 11 months. Since her discharge, although not placed under the most favorable conditions for preserving mental health, she has kept well, and up to the present time has been able to support herself by her work.

Thirty-eight patients died during the year,—12 of phthisis, 9 from exhaustion of chronic mania, 5 from epilepsy, 5 from paresis, and 1 each from apoplexy, paralysis, brain disease, empyema, heart disease, senility and senile gangrene.

Ratio of Deaths from the Opening of the Asylum to Oct. 1, 1886.

OFFICIAL YEAR.	Whole No. of Patients.	Daily Average No. of Patients.	DEATHS.			Per cent. on Whole No. of Patients treated.	Per cent. on daily Average No. of Patients.
			Males.	Females.	Total.		
1877-78, . . .	429	382.98	18	8	26	6.05	6.78
1878-79, . . .	422	367.41	22	11	33	7.82	8.98
1879-80, . . .	413	363.15	15	8	23	5.56	6.33
1880-81, . . .	401	362.09	18	6	24	5.98	6.62
1881-82, . . .	439	375.59	21	11	32	7.28	8.51
1882-83, . . .	461	384.33	37	24	61	13.23	15.84
1883-84, . . .	438	390.69	22	20	42	9.58	10.75
1884-85, . . .	448	391.12	20	14	34	7.58	8.69
1885-86, . . .	476	400.28	23	15	38	7.98	9.49

From the nature of the case, our change of population is not a rapid one, and were it not for the transfers made by the Board of Health, Lunacy and Charities, it would be still slower than it is. Of the 40 persons discharged from the

asylum during the past year 31 were removed to some other State hospital or receptacle for the insane, leaving only 9 actual discharges. Adding to this number the 38 deaths, it will be seen that the asylum, if left to itself, could furnish room for about 50 new patients yearly and only to this extent relieve the overcrowded condition of the other State hospitals.

Our number of patients has at no time been much below the full capacity of the asylum, and during the greater part of the year the house has been crowded to the utmost limit consistent with safety. We have, however, again escaped serious accident, and have been unusually free from sickness in any form. Although all of the deaths for several years past have been from chronic and lingering disease, directly dependent upon or intimately related to the mental condition of the patient, there has always been much acute sickness during this time and often of a severe type, as was to be expected among so large a class of persons in an extreme state of mental and physical debility. Notwithstanding the fact that our patients cannot get out of doors during the winter and early spring on account of their feeble bodily condition, they appear to have been more free from physical ailments during these months than during the warmer portions of the year, when bowel troubles have been especially prevalent. For the last twelve months, however, with an average population of over 400, it is certainly worthy of remark that we have not had a single case of acute sickness severe enough to confine the person to the bed for more than three or four days at a time. I cannot but attribute a great deal of this result to the fact that the patients have been more generally employed than heretofore and that those who have not had employment have been kept as much as possible in the open air. During the spring and summer our wards have been generally deserted through the day, the patients being out of doors, scattered about the grounds in front of the asylum, from 9 A. M. until dark, only coming in for their meals.

On any pleasant day it is seldom possible to find more than half a dozen patients (including the sick in bed) in the male wards. Although it has not seemed practicable to so

completely clear the female wards,—the women, both patients and attendants, being less disposed to go out of doors, and having more legitimate excuses for remaining in,—not more than fifteen or twenty women are usually found indoors after ten o'clock, and a majority of these go out during some portion of the day. With a single exception, no patient has been kept in on account of mental condition, and all have used the lawn in front of the asylum for their out-door recreation, and as our grounds border on one of the most frequented streets of Worcester, these patients have at all times been subject to inspection by passers-by. I formerly regarded this lack of seclusion as one of the great disadvantages of our location here in the heart of the city, but with further experience I am forced to look upon this publicity rather as an advantage than otherwise. To watch the busy traffic of the street is to many an inmate of the asylum, shut out as it were from the world, no small amount of pleasure and I have no doubt it adds a certain degree of diversity to each patient's life and serves to relieve the monotony of daily routine.

The difficulty of providing a place of out-door recreation for our disturbed patients has proved, upon trial, not insurmountable. Formerly such patients were turned loose in the "airing courts," so called, or blind yards at the rear of the asylum; courts with no outlook but a high board fence on one side and the bare walls of the asylum on the other, — a place cheerless and dismal in the extreme. Here the excited patients were turned out to spend the day, with nothing to occupy their attention save their own insane fancies; these they were at liberty to indulge to any and every extent, the very seclusion inviting rather than repressing the exercise of their degrading habits. Since these yards were abolished, our disturbed classes have used the grounds in front of the asylum in common with the more quiet patients, but as they were taken out either one by one or at most two or three together, they have been thereby limited in their out-of-door exercise to a very short time each day. During the past season all such patients have been out the same as the others and I have yet to see any bad results therefrom. True, it has not been an easy matter at all times to repress the turbulent, and keep

certain patients within bounds, but there has been no serious difficulty on this score, and the change has appeared to me to be in every way advantageous. The patients, in watching the passers-by, have found something to attract their attention and excite their interest and, under the stimulus of publicity, the noisy, untidy and shameless have gained in self-control and self-respect, while the attendants have been stimulated to exercise greater vigilance to prevent escapes and repress turbulent and unseemly conduct on the part of those under their charge.

Although the amount of liberty granted patients has been increased gradually from time to time, there has been no increase in the number of escapes. During the past season, when all the patients in eight open wards have had liberty to go and come within the grounds without any restrictions whatever, and when at least ninety per cent. of our inmates, during a great portion of the day, have not been under lock and key, but four persons have escaped, all but one of whom have been returned.

For the past three months there has been no restraint or seclusion on the male side of the house. At the present writing two females are confined in chairs by waist-belts, one wears a camisole, one is in seclusion, and six are confined in bed at night,—a fair average of the daily amount of restraint used during the year.

Our patients have been more generally employed than during any previous year. Between sixty and seventy work daily outside the wards, doing in every case a fair day's labor, while as many more have been occupied a portion of each day in ward-work, sewing, mending, or in odd jobs about the premises. It would be difficult to estimate the value in dollars and cents of this work to the asylum, but that it is considerable there can be no doubt, neither can it be doubted that such labor is of almost incalculable value to the patients employed.

In the way of improvements, we have completed our laundry, put in a steam-mangle, a shirt and collar ironer, a centrifugal wringer, a patented device for drying clothing, the principle of which is the removal of the moist air from the dry-room by a blower, passing it over cold water pipes

to condense the moisture and returning it to the room as dry air without appreciable loss of heat. This arrangement has now been in use during one season and has been found to work very satisfactorily, drying clothing with far greater rapidity than by the old methods, whatever the state of the out-door atmosphere.

Last year the city raised the grade of the street opposite our rear entrance and along Mulberry and East Central streets several feet, and it became necessary to take down our fence on the line of these streets, put in a retaining wall and, resetting the stone posts, replace the fence, which was done in the early spring. We have also put the stable in repair, laid a new plank floor in our air-chamber, thrown out an addition to our chapel wing dining-room in order that all our outside help may be served with their meals at the same time and not as now at different tables, and torn out our general kitchen with the view to thorough repair. The demand for alterations and repairs in this department has been pressing for several years, but the work has been put off from time to time on account of the difficulty of providing temporary arrangements for cooking while these alterations were going on. This however, although necessitating considerable preliminary work, has now been successfully provided for, our kitchen has been relathed and plastered and is ready for the floors and standing finish.

Outside fire-escapes have been built at the suggestion and under the approval of the state inspector of factories and buildings. With these and our four hydrants, a stand pipe in each portico, with ample hose to reach any part of the house, hand-pumps and fire-pails in every clothes room, hand-grenades in the attendants' room and on every floor of the centre and rear buildings, and in the various work rooms, two chemical engines, and the city fire department within easy call, every reasonable provision against fire seems to have been made.

The longer I am connected with this institution the more strongly am I convinced that there is really very much in a name, and that it would be greatly to the advantage of the asylum if its name, which I cannot but regard as a very unfortunate one, could be changed. As "*The Temporary Asylum for*

the Chronic Insane" it mattered little by what term it was known; but now that the "temporary" seems to have been dropped by common consent, only appearing in our official reports, the necessity for a permanent institution of this kind in Massachusetts being conceded with the prospect that other similar ones will be needed in the near future, it is really a matter of some consequence as to the name by which this and like institutions shall be designated. I find that in the minds of the majority of people there attaches something of reproach to the term "chronic" as applied to the insane. They forget that nothing is thereby asserted as to curability or incurability, but recognizing the fact that most insanity of long standing is permanent, jump to the conclusion that chronic, incurable and hopeless are interchangeable terms as applied to this disease. After every transfer of patients from other hospitals the friends of some one or more of them come to me with expressions of deep grief over the fact that their relatives have been pronounced incurable and sent to an institution where, as they inferred, their surroundings would be less comfortable, their diet more meagre, and where nothing further would be attempted toward the treatment or cure of their malady.

It has always been an easy matter to reassure any such who come to the asylum in person, go through our wards and there see their friends; but I have no doubt that many others, who cannot or do not come and see for themselves, feel that their friends have been harshly dealt with in being removed to the Asylum for the Chronic Insane. It is true that many of our patients are entirely oblivious as to name or surroundings, but such is not the fact with the majority. Some patients even retain all of the finer feelings natural to them in health, and in their correspondence and their intercourse with friends avoid the use of the word chronic as applied to the asylum, showing that to them as well as to others something of opprobrium attaches to the name. To some persons these objections, as urged by friends of patients, may seem to spring from sentiment merely, and therefore to be unworthy of attention, but every one will, I think, agree that, as far as the patients themselves are concerned, no good purpose can be served by constantly keeping before

them, like a death's head at the feast, a reminder that their condition is hopeless and beyond palliation or cure. The only argument in favor of the present name is that it plainly distinguishes between the two Worcester Hospitals, but the same result would be equally as well accomplished by the use of the word asylum.

In consideration of the above facts, I would respectfully request your honorable board to petition the coming Legislature to change the name of this institution from "The Temporary Asylum for the Chronic Insane" to "The Asylum at Worcester."

The average weekly cost per patient has been \$3.01.

We have had the usual Sunday afternoon service in our chapel during the year and a weekly entertainment through the winter.

The asylum is indebted to Miss Anna S. Folsom for magazines, etc., to the Hospital Newspaper Company of Boston for papers, magazines and Christmas cards, and to Charles H. Doe & Co. for a copy of the Evening Gazette.

There has been no change in the asylum staff and less than usual among the attendants, the most of whom have, as I can but feel, worked conscientiously for the welfare of the institution and the patients under their care.

H. M. QUINBY,
Superintendent.

SEPTEMBER 30, 1886.

STATISTICAL TABLES.

TABLES FOR UNIFORM STATISTICS

IN THE

MASSACHUSETTS HOSPITALS AND ASYLUMS FOR THE INSANE.

(Approved by the Board of Health, Lunacy and Charity, April 3, 1880.)

By the act of the Legislature establishing an Asylum for the Chronic Insane, it was provided, "That the inmates thereof shall consist only of such chronic insane as may be transferred thereto by the Board of State Charities in the manner provided in section four, chapter two hundred and forty, of the acts of the year eighteen hundred and sixty-three." (Statutes, 1877, chap. 227.)

All the patients of the Asylum, therefore, have been former inmates of one or more hospitals in the State; and whenever in these tables they appear as "first admissions," they are only to be regarded as first admissions to this Asylum.

1. General Statistics of the Year.

	Males.	Females.	Totals.
Patients in asylum Oct. 1, 1885,	207	198	405
Admissions within the year,	41	30	71
Whole number of cases within the year, .	248	228	476
Discharges within the year,			
Viz.: as recovered,	—	1	1
much improved,	—	—	—
improved,	2	2	4
unimproved,	31	4	35
Deaths,	23	15	38
Patients remaining Sept. 30, 1886, . . .	192	206	398
Viz.: supported as State patients, . . .	64	38	102
town patients,	128	168	296
private patients,	—	—	—
Number of different persons within the year,	248	228	476
admitted,	41	30	71
recovered,	—	1	1
Daily average number of patients, . . .	195.78	204.50	400.28

2. Monthly Admissions, Discharges and Averages.

MONTHS.	ADMISSIONS.			DISCHARGES (including Deaths).			DAILY AVERAGE OF PATIENTS IN THE HOUSE.		
	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.
1885.									
October,	—	—	—	2	1	3	206.71	197.19	403.90
November,	—	—	—	25	3	28	200.16	195.77	395.93
December,	20	19	39	4	5	9	196.84	190.25	387.09
1886.									
January,	—	—	—	—	—	—	196.00	207.13	403.13
February,	—	—	—	2	—	—	195.57	207.00	402.57
March,	—	—	—	3	1	4	192.42	206.19	398.61
April,	—	1	1	4	1	5	188.30	205.80	394.10
May,	—	—	—	1	1	2	186.71	205.87	392.58
June,	20	10	30	1	2	3	189.50	205.80	395.30
July,	—	—	—	3	2	5	202.91	212.64	415.55
August,	1	—	1	3	2	5	199.51	211.39	410.90
September,	—	—	—	8	4	12	194.73	208.97	403.70
Total of cases,	41	30	71	56	22	78	—	—	—
Total of persons,	41	30	71	56	22	78	—	—	—

3. Received on First and Subsequent Admissions.

NUMBER OF THE ADMISSION.	CASES ADMITTED.			TIMES PREVIOUSLY RECOVERED.		
	Males.	Females.	Totals.	Males.	Females.	Totals.
First,	41	30	71	-	-	-
Second,	-	-	-	-	-	-
Etc.,	-	-	-	-	-	-
Total of cases, . .	41	30	71	-	-	-
Total of persons, . .	41	30	71	-	-	-

4. Ages of Persons Admitted for the First Time.

AGES.	AT FIRST ATTACK OF INSANITY.			WHEN ADMITTED.		
	Males.	Females.	Totals.	Males.	Females.	Totals.
Fifteen years and less, . .	2	2	4	1	-	1
From 15 to 20 years, . .	2	-	2	1	1	2
20 to 25 years, . .	5	1	6	4	1	5
25 to 30 years, . .	5	4	9	3	5	8
30 to 35 years, . .	2	3	5	4	1	5
35 to 40 years, . .	4	5	9	5	6	11
40 to 50 years, . .	9	5	14	12	6	18
50 to 60 years, . .	3	1	4	5	3	8
60 to 70 years, . .	1	1	2	4	3	7
70 to 80 years, . .	-	-	-	-	1	1
Over 80 years, . .	-	1	1	-	1	1
Unknown,	8	7	15	2	2	4
Totals,	41	30	71	41	30	71

5. *Parentage of Persons Admitted.*

PLACES.	MALES.		FEMALES.		TOTALS.	
	Father.	Mother.	Father.	Mother.	Father.	Mother.
Vermont,	-	-	1	1	1	1
Massachusetts,	11	11	2	2	13	13
Rhode Island,	1	1	1	1	2	2
Maine,	-	-	2	2	2	2
New Hampshire,	2	2	-	-	2	2
Georgia,	1	1	-	-	1	1
Louisiana,	1	1	-	-	1	1
New York,	1	1	-	-	1	1
Texas,	1	1	-	-	1	1
Nova Scotia,	2	2	1	1	3	3
Newfoundland,	1	1	-	-	1	1
Prince Edward Island,	1	1	-	-	1	1
New Brunswick,	-	-	1	1	1	1
England,	-	-	1	1	1	1
Scotland,	1	1	-	-	1	1
Ireland,	8	8	15	15	23	23
Sweden,	1	1	-	-	1	1
Italy,	1	1	-	-	1	1
Germany,	4	4	1	1	5	5
South America,	1	1	-	-	1	1
Unknown,	3	3	5	5	8	8
Totals,	41	41	30	30	71	71

6. *Residence of Persons Admitted.*

PLACES.	Males.	Females.	Total.
Massachusetts, viz.:—			
Suffolk County,	31	20	51
Middlesex County,	5	6	11
Norfolk County,	-	1	1
Essex County,	1	-	1
Worcester County,	1	-	1
Unknown,	3	3	6
Totals,	41	30	71
Cities or large towns,	41	30	71

7. *Civil Condition of Persons Admitted.*

NUMBER OF THE ADMISSION.	UNMARRIED.			MARRIED.			WIDOWED.			UNKNOWN.		
	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.
First, . . .	19	13	32	18	5	23	2	8	10	2	4	6
Second, . . .	—	—	—	—	—	—	—	—	—	—	—	—
Totals, . . .	19	13	32	18	5	23	2	8	10	2	4	6

8. *Occupations of Persons Admitted.*

OCCUPATIONS.	Males.	Females.	Totals.
Housekeepers,	—	3	3
Laborers,	7	—	7
Domestics,	—	6	6
Dressmakers,	—	2	2
Gilder,	1	—	1
Wives,	—	1	1
Waiters,	2	—	2
Sailor,	1	—	1
Carpenter,	1	—	1
Blacksmith,	1	—	1
Salesmen,	2	—	2
Barber,	1	—	1
Mason,	1	—	1
Shoemaker,	1	—	1
Locksmith,	1	—	1
Curriers,	2	—	2
Jeweller,	1	—	1
Hostler,	1	—	1
Brickmaker,	1	—	1
Musician,	1	—	1
Teamster,	1	—	1
Printer,	1	—	1
Operative,	1	1	2
Tailor,	1	—	1
Washerwoman,	—	1	1
No occupation,	5	1	6
Unknown,	7	15	22
Totals,	41	30	71

9. *Form of Disease in the Cases Admitted.*

FORM OF DISEASE.	Males.	Females.	Totals.
Mania, chronic,	26	11	37
Mania, recurrent,	-	1	1
Epilepsy,	3	3	6
Dementia, chronic,	2	8	10
Melancholia, chronic,	1	4	5
Idiocy, congenital,	1	-	1
Paresis,	7	2	9
Primary dementia,	1	1	2
Total of cases,	41	30	71
Total of persons,	41	30	71

10. *Reported Duration of Insanity before Last Admission.*

PREVIOUS DURATION.	FIRST ADMISSION TO THIS HOSPITAL.			ALL OTHER ADMISSIONS.			TOTALS.		
	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.
Congenital,	1	-	1	-	-	-	1	-	1
Under 1 month,	-	-	-	-	-	-	-	-	-
From 1 to 3 months,	-	2	2	-	-	-	-	2	2
3 to 6 months,	-	-	-	-	-	-	-	-	-
6 to 12 months,	1	2	3	-	-	-	1	2	3
1 to 2 years,	7	4	11	-	-	-	1	4	11
2 to 5 years,	7	9	16	-	-	-	7	9	16
5 to 10 years,	4	3	7	-	-	-	4	3	7
10 to 20 years,	6	3	9	-	1	1	6	4	10
Over 20 years,	1	-	1	-	-	-	1	-	1
Unknown,	14	6	20	-	-	-	14	6	20
Total of cases,	41	29	70	-	1	1	41	30	71
Total of persons,	41	29	70	-	1	1	41	30	71
Av'ge of known cases,	6.01	3.65	4.83	-	10.25	10.25	6.01	4.05	5.03

11. Assigned Causes of Insanity in Persons Admitted.

CAUSES.	Males.	Females.	Totals.
Cerebro-spinal meningitis,	1	—	1
Intemperance,	3	1	4
Epilepsy,	2	—	2
Syphilis,	1	—	1
Masturbation,	5	—	5
General dissipation,	1	—	1
Heredity,	3	3	6
Menopause,	—	2	2
Apoplexy,	—	1	1
Typhoid fever,	1	—	1
Menstrual irregularity,	—	1	1
Old age,	—	1	1
Fright,	1	—	1
Religious excitement,	1	—	1
Financial trouble,	1	—	1
Overwork,	3	2	5
Injury,	1	—	1
Ill health,	1	3	4
Congenital,	1	—	1
Family troubles,	—	1	1
Business troubles,	1	—	1
Puerperal,	—	2	2
Lactation,	—	1	1
Unknown,	14	12	26
Totals,	41	30	71

12. Relations to Hospitals of Persons Admitted.

HOSPITAL RELATIONS.	Males.	Females.	Totals.
First admission to any hospital for insane,	—	—	—
Former inmates of the asylum,	—	1	1
of Danvers Lunatic Hospital,	40	28	68
of Tewksbury Almshouse,	—	5	5
of Boston Lunatic Hospital,	1	—	1
of Worcester Lunatic Hospital,	1	1	2
of Northampton Lunatic Hospital,	1	1	2
of Taunton Lunatic Hospital,	2	—	2
of Stockton (Cal.) Hospital,	—	1	1
Total of cases,	45	37	82
Total of persons,	41	30	71

13. How Supported.

	SUPPORTED AS —	PATIENTS ADMITTED.			AVERAGE OF THE YEAR.		
		Males.	Females.	Totals.	Males.	Females.	Totals.
State patients,	28	15	43	64.08	43.24	107.32
Town patients,	13	15	28	131.70	161.26	292.96
Totals,		41	30	71	195.78	204.50	400.28

14. Discharges, Classified by Admission and Result.

ADMISSIONS.	RECOVERED.		IMPROVED.		UNIMPROVED.		DIED.		TOTALS.	
	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Totals.
First,	—	1	1	2	2	4	31	4	35	23
Second,	—	—	—	—	—	—	—	—	—	—
Totals,	—	1	1	2	2	4	31	4	35	23
Persons,	—	1	1	2	2	4	31	4	35	23

15. Cases Resulting in Death — Duration.*

	DURATION BEFORE ADMISSION.			HOSPITAL RESIDENCE.			WHOLE DURATION FROM THE ATTACK.		
	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
Congenital,	—	—	—	—	—	—	—	—	—
Under 1 month,	—	—	—	—	—	—	—	—	—
From 1 to 3 months,	—	—	—	—	—	—	—	—	—
3 to 6 months,	—	1	1	—	2	2	—	—	—
6 to 12 months,	4	1	5	2	2	4	—	—	—
1 to 2 years,	3	6	9	4	3	7	2	2	4
2 to 5 years,	7	4	11	5	2	7	6	4	10
5 to 10 years,	2	2	4	8	6	14	4	3	7
10 to 20 years,	3	1	4	—	—	—	6	5	11
Over 20 years,	—	—	—	—	—	—	1	1	2
Unknown,	4	—	4	—	—	—	4	—	4
Totals,	23	15	38	23	15	38	23	15	38
Average of known cases (in months),	49.05	37.06	43.05	44.43	44.66	44.54	90.20	90.20	90.20

* Of the attack resulting in death.

16. Cases Discharged by Recovery or Death.

FORM OF INSANITY.	RECOVERIES.			DEATHS.		
	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.
Mania, chronic,	-	-	-	11	9	20
Epilepsy,	-	-	-	7	1	8
Dementia, chronic, . . .	-	-	-	1	3	4
Melancholia, chronic, . .	-	1	1	-	-	-
Paresis,	-	-	-	4	1	5
Dementia, primary, . . .	-	-	-	-	1	1
Total of cases,	-	1	1	23	15	38
Total of persons,	-	1	1	23	15	38

17. Causes of Death.

CAUSES.	Males.	Females.	Totals.
Phthisis,	8	4	12
Epilepsy,	5	-	5
Senility,	-	1	1
Exhaustion,	3	6	9
Paresis,	4	1	5
Apoplexy,	1	-	1
Paralysis,	1	-	1
Brain disease,	-	1	1
Heart disease,	-	1	1
Empyema,	1	-	1
Senile gangrene,	-	1	1
Totals,	23	15	38

18. *Ages of those who Died.*

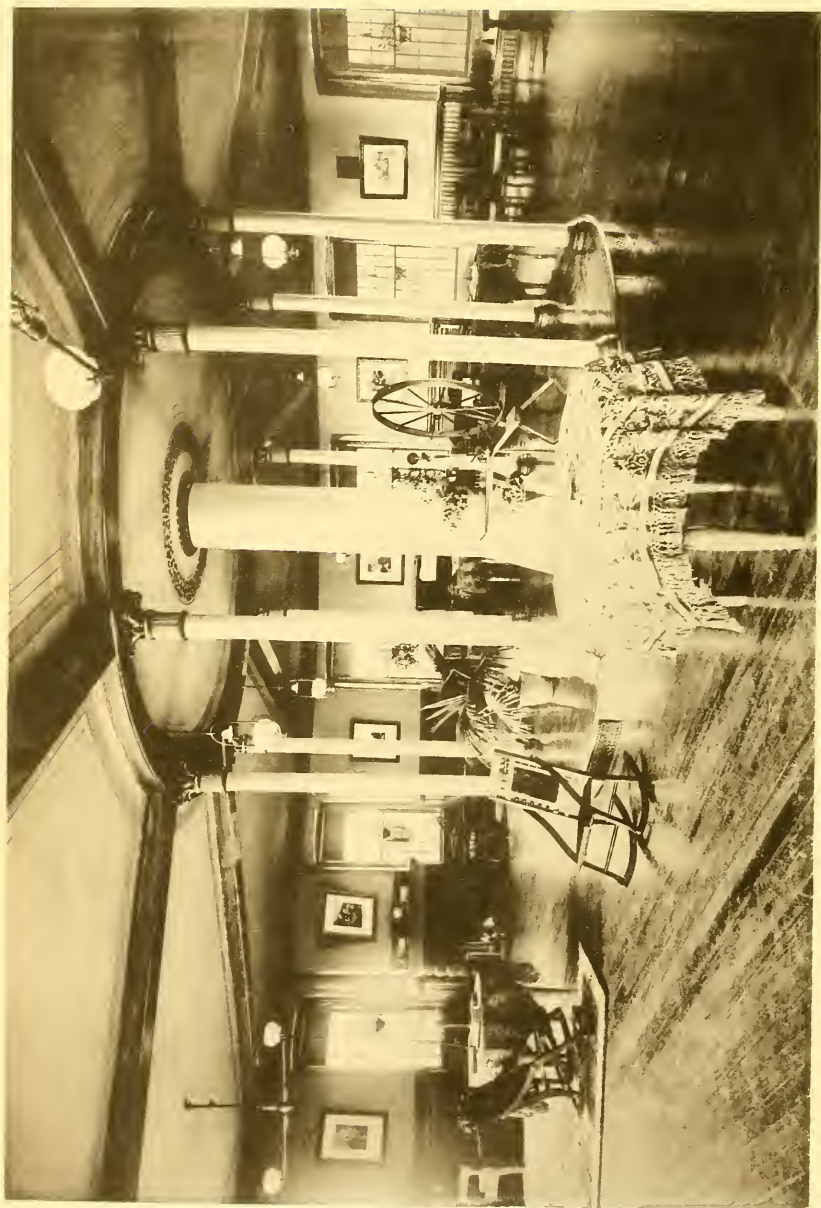
AGES.	AT TIME OF FIRST ATTACK.			AT TIME OF DEATH.		
	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.
Fifteen years and less, . . .	2	1	3	-	-	-
From 15 to 20 years, . . .	2	1	3	-	1	1
20 to 25 years, . . .	3	-	3	2	1	3
25 to 30 years, . . .	-	2	2	2	-	2
30 to 35 years, . . .	3	1	4	3	2	5
35 to 40 years, . . .	3	1	4	3	-	3
40 to 50 years, . . .	3	3	6	6	3	9
50 to 60 years, . . .	2	4	6	2	2	4
60 to 70 years, . . .	-	2	2	2	3	5
70 to 80 years, . . .	-	-	-	1	2	3
Over 80 years, . . .	-	-	-	-	1	1
Unknown, . . .	5	-	5	2	-	2
Totals, . . .	23	15	38	23	15	38

19. *Annual Admissions since the Opening of the Asylum, with the Discharges and Deaths within the Official Year, and the Number of each Year's Admissions remaining Sept. 30, 1886.*

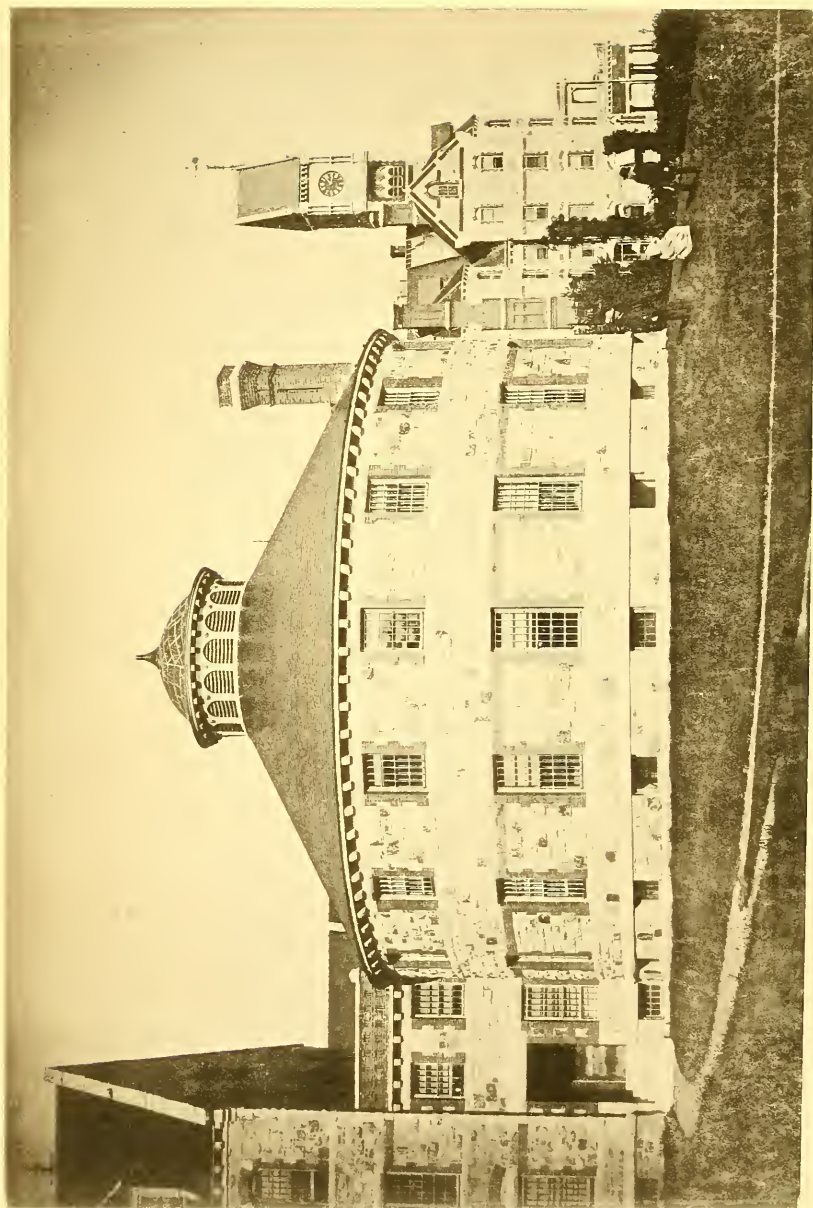
YEARS.	NEW CASES.																	
	ADMITTED.			DISCHARGED AND DIED IN 1886.														
	Males.	Females.	Totals.	RECOVERED.			MUCH IMPROVED.			IMPROVED.			UNIMPROVED.			DIED.		
				Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
1878, . . .	209	220	429	-	1	1	-	-	-	1	1	2	5	1	6	5	6	11
1879, . . .	30	17	47	-	-	-	-	-	-	-	-	-	2	-	2	3	-	3
1880, . . .	26	16	42	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1881, . . .	10	18	28	-	-	-	-	-	-	-	-	-	-	-	-	2	-	2
1882, . . .	49	22	71	-	-	-	-	-	-	-	-	-	8	1	9	1	2	3
1883, . . .	51	29	80	-	-	-	-	-	-	-	-	-	8	1	9	2	1	3
1884, . . .	37	10	47	-	-	-	-	-	-	-	-	-	1	-	1	3	-	3
1885, . . .	24	38	62	-	-	-	-	-	-	1	-	1	4	-	4	4	3	7
1886, . . .	41	30	71	-	-	-	-	-	-	-	1	1	1	3	1	4	3	6
Totals, . .	477	400	877	-	-	-	-	-	-	2	2	4	31	4	35	23	15	38

19. Annual Admissions since the Opening of the Asylum, with the Discharges and Deaths within the Official Year, and the Number of each Year's Admissions remaining Sept. 30, 1886 — Concluded.

YEARS.	READMITTED.			READMITTED CASES.												REMAINING OF EACH YEAR'S ADMISSIONS.		
	Males.	Females.	Totals.	DISCHARGED AND DIED IN 1886.												Males.	Females.	Totals.
				RECOVERED.			MUCH IMPROVED.			IMPROVED.			UNIMPROVED.					
				Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.			
1878, .	-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	54	86	140
1879, .	-	-	-	1	1	1	1	1	1	1	1	1	1	1	1	15	9	24
1880, .	-	-	-	1	1	1	1	1	1	1	1	1	1	1	1	6	9	15
1881, .	-	-	-	1	1	1	1	1	1	1	1	1	1	1	1	3	10	13
1882, .	-	-	-	1	1	1	1	1	1	1	1	1	1	1	1	17	10	27
1883, .	-	-	-	1	1	1	1	1	1	1	1	1	1	1	1	26	17	43
1884, .	-	-	-	1	1	1	1	1	1	1	1	1	1	1	1	24	7	31
1885, .	-	-	-	1	1	1	1	1	1	1	1	1	1	1	1	12	33	45
1886, .	-	-	-	1	1	1	1	1	1	1	1	1	1	1	1	35	25	60
Totals,	-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	192	206	398



DAY ROOM—HOOPER HALL.



HOOPER HALL.



